Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF WISCONSIN	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on **Nicholas** Victoria your government-issued First name First name picture identification (for example, your driver's James Janice license or passport). Middle name Middle name Bring your picture Koleas Koleas identification to your Last name and Suffix (Sr., Jr., II, III) Last name and Suffix (Sr., Jr., II, III) meeting with the trustee. All other names you have used in the last 8 years FKA Victoria Janice Robertson Include your married or maiden names. Only the last 4 digits of your Social Security number or federal xxx-xx-9531 xxx-xx-5699 Individual Taxpayer Identification number (ITIN)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	234 North 10th Avenue	If Debtor 2 lives at a different address:
		West Bend, WI 53095 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Washington	Hambor, Silvor, Silv, State & Ell Godo
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 1 Nicholas James Ko Victoria Janice Kole					Case	number (if known)	
Par	t 2: Tell the Court About	rour Bank	ruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are			orief description of each, go to the top of page 1			.C. § 342(b) for Individ	uals Filing for Bankruptcy
	choosing to file under	☐ Chapt	er 7					
		☐ Chapt	er 11					
		☐ Chapt	er 12					
		■ Chapt	er 13					
8.	How you will pay the fee	abo ord	out how yo	u may pay. Typically, if attorney is submitting yo	you are paying	the fee yourself,	you may pay with cash	r local court for more details n, cashier's check, or money h a credit card or check with
				the fee in installment e in Installments (Officia		e this option, sigr	and attach the Application	ation for Individuals to Pay
		☐ I re but app	quest that is not requires to you	t my fee be waived (Yourled to, waive your fee,	ou may request and may do so re unable to pay	only if your inco the fee in instal	me is less than 150% (Iments). If you choose	oter 7. By law, a judge may, of the official poverty line that this option, you must fill out your petition.
9.	Have you filed for	□ No.						
	bankruptcy within the last 8 years?	Yes.						
	•		District	EDWI	When	4/26/17	Case number	17-23965-bhl-ch13-dm
			District	EDWI	When	4/01/16	Case number	16-22968-svk-13-dm
			District		When		Case number	
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to	/ou
			District		When		Case number, if	known
			Debtor				Relationship to	/ou
			District		When		Case number, if	known
11.	Do you rent your	■ No.	Go to li	ine 12.				
	residence?	☐ Yes.	Has yo	ur landlord obtained an	eviction judgmo	ent against you?		

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

No. Go to line 12.

this bankruptcy petition.

	otor 1 Nicholas James Ko Victoria Janice Kole				Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Owi	n as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	oer, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you ii	ndicate that you are flow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am i Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
	5 · · · · · · · · ·				Number, Street, City, State & Zip Code

Debtor 1 Nicholas James Koleas
Debtor 2 Victoria Janice Koleas

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 Nicholas James Ko tor 2 Victoria Janice Kole				Case number	f (if known)		
Pari	6: Answer These Questi	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily co individual primarily for a personal primari			ned in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.	Are your debts primarily but money for a business or investigation.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you or	we that are not consur	mer debts or busines	s debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Dare paid that funds will be ava			erty is excluded and administrative expenses		
	administrative expenses are paid that funds will		□ No					
	be available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do you estimate that you	1 -49		☐ 1,000-5,000		☐ 25,001-50,000 ☐ 50,004,400,000		
	owe?	☐ 50-99 ☐ 100-1 ☐ 200-9	99	□ 5001-10,000 □ 10,001-25,00		☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to	□ \$0 - \$	1	□ \$1,000,001 -		□ \$500,000,001 - \$1 billion		
	be worth?		01 - \$100,000 ,001 - \$500,000	□ \$10,000,001 - \$50 r □ \$50,000,001 - \$100		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			001 - \$500,000 001 - \$1 million		1 - \$500 million	☐ More than \$50 billion		
20.	How much do you estimate your liabilities	□ \$0 - \$50,000 □ \$50,000		□ \$1,000,001 - □ \$10,000,001		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion		
	to be?	□ \$50,001 - \$100,000 ■ \$100,001 - \$500,000		□ \$50,000,001		□ \$10,000,000,001 - \$10 billion		
			001 - \$1 million	\$100,000,00	01 - \$500 million	☐ More than \$50 billion		
Part	7: Sign Below							
For	you	I have ex	camined this petition, and I dec	lare under penalty of p	perjury that the inform	nation provided is true and correct.		
						under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.		
			rney represents me and I did not, I have obtained and read the			an attorney to help me fill out this		
		I request	relief in accordance with the c	hapter of title 11, Unite	ed States Code, spec	ified in this petition.		
		bankrupt and 357	tcy case can result in fines up to 1.		onment for up to 20 years	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
			olas James Koleas s James Koleas		/s/ Victoria Janice Victoria Janice Ko			
			e of Debtor 1		Signature of Debtor			

Executed on January 31, 2019 MM / DD / YYYY

Executed on January 31, 2019 MM / DD / YYYY

Debtor 1	Nicholas James Koleas	
Debtor 2	Victoria Janice Koleas	

Case number	(if known)
-------------	------------

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michael J. Watton	Date	January 31, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Michael J. Watton		
Printed name		
Watton Law Group Firm name		
301 West Wisconsin Avenue		
5th Floor		
Milwaukee, WI 53203		
Number, Street, City, State & ZIP Code		
Contact phone (414) 273-6858	Email address	jdrewicz@wattongroup.com
1035900 WI		
Bar number & State		

Fill in thi	s information to identify your case:		
Debtor 1	Nicholas James Koleas First Name Middle Name Last Name		
Debtor 2	Victoria Janice Koleas		
(Spouse if, fi			
United Sta	ates Bankruptcy Court for the: EASTERN DISTRICT OF WISCONSIN		
Case num		Cha.	de if their in one
(ii Kilowii)		_	k if this is an nded filing
	•		
Officia	al Form 106Sum		
	ary of Your Assets and Liabilities and Certain Statistical Information		12/15
nformatio	nplete and accurate as possible. If two married people are filing together, both are equally responsible form. Fill out all of your schedules first; then complete the information on this form. If you are filing amendonal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. Summarize Your Assets		
			assets of what you own
1. Sch o	edule A/B: Property (Official Form 106A/B) Copy line 55, Total real estate, from Schedule A/B	\$	163,100.00
1b. (Copy line 62, Total personal property, from Schedule A/B	\$	16,155.00
1c. C	Copy line 63, Total of all property on Schedule A/B	\$	179,255.00
Part 2:	Summarize Your Liabilities		,
r arr 2.	Cummanize Four Elabinates		iabilities nt you owe
		Ailloui	iii you owe
	edule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	165,230.75
3. <i>Sche</i> 3a. 0	edule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	40,646.19
3b. 0	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	189,587.77
	Your total liabilities	\$	395,464.71
Part 3:	Summarize Your Income and Expenses		
	edule I: Your Income (Official Form 106I) y your combined monthly income from line 12 of Schedule I	\$	4,343.53
	edule J: Your Expenses (Official Form 106J) y your monthly expenses from line 22c of Schedule J	\$	2,857.00
Part 4:	Answer These Questions for Administrative and Statistical Records		
6. Are	you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	chedules.
■ 7. Wh a	Yes It kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

463.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	40,646.19
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	70,841.28
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	111,487.47

	1 Nic	cholas Jan	nes Koleas					
		t Name		Name	Last Name			
Debtor . Spouse, i		ctoria Janio		Name	Last Name			
•								
Jnitea :	States Bankrupt	by Court for	the: EASTERN	ואופוט	CT OF WISCONSIN			
case n	umber							☐ Check if this is a amended filing
each chink it fi	its best. Be as co	/B: Pi	roperty escribe items. List a	e. If two	only once. If an asset fits in more than one married people are filing together, both are his form. On the top of any additional pages	equally respo	onsible for su	pplying correct
art 1:	, , I	esidence, B	uilding, Land, or Ot	her Real	Estate You Own or Have an Interest In			
.1 23	34 North 10th A		scription	What	t is the property? Check all that apply Single-family home Duplex or multi-unit building	the amount	of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i>
Str					Condominium or cooperative	Creditors W	rno Have Clair	ns Secured by Property.
Str					Manufactured or mobile home			
	/est Bend	WI	53095-0000		Manufactured or mobile home Land	Current val		Current value of the portion you own?
		WI State	53095-0000 ZIP Code			entire prop		portion you own?
W					Land	entire prop \$16 Describe th	erty? 3,100.00 ne nature of y	portion you own? \$163,100.0 our ownership interest
W				Uho	Land Investment property Timeshare Other has an interest in the property? Check one	entire prop \$16 Describe th (such as fe a life estate	erty? 3,100.00 ne nature of y e simple, tense), if known.	portion you own? \$163,100.0
W City	ty				Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	entire prop \$16 Describe th (such as fe	erty? 3,100.00 ne nature of y e simple, tense), if known.	portion you own? \$163,100.0 our ownership interest
W City				Uho	Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	entire prop \$16 Describe th (such as fe a life estate Fee simp	erty? 3,100.00 ne nature of y e simple, ten: e), if known.	portion you own? \$163,100.0 our ownership interest ancy by the entireties, c
W City	/ashington			Who	Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	entire prop \$16 Describe th (such as fe a life estate Fee simp	erty? 3,100.00 ne nature of y e simple, ten: e), if known. le if this is com tructions)	portion you own? \$163,100.0 our ownership interest

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debt Debt		Nicholas Jam Victoria Janio			Case number (if known))	
3. C a	ırs, vans	s, trucks, trac	tors, sport utility ve	hicles, motorcycles			
	No						
	Yes						
_	162						
3.1	Make:	Dodge		Who has an interest in the property? Check one	the amount of an	y secured	ms or exemptions. Put claims on Schedule D:
	Model:			Debtor 1 only	Creditors Who Ha	ave Claim	s Secured by Property.
	Year:	2007	103,000	Debtor 2 only	Current value of		Current value of the
		imate mileage: nformation:	100,000	■ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	entire property?		portion you own?
	0			At least one of the debtors and another			
				■ Check if this is community property (see instructions)	\$2,00	0.00	\$2,000.00
3.2	Make:	Chevrolet		Who has an interest in the property? Check one			ms or exemptions. Put claims on Schedule D:
	Model:	Impala		Debtor 1 only			s Secured by Property.
	Year:	2006		Debtor 2 only	Current value of	the	Current value of the
	Approx	imate mileage:	85001	■ Debtor 1 and Debtor 2 only	entire property?		portion you own?
	Other in	nformation:		At least one of the debtors and another			
				Check if this is community property (see instructions)	\$5,00	0.00	\$5,000.00
5 A				n for all of your entries from Part 2, includin			\$7,000.00
.pa	ages yo	u nave attach	eu ioi Fait 2. Wille	triat number nere	=>		. ,
Part 3			nal and Household It				
				terest in any of the following items?		po Do	urrent value of the ortion you own? o not deduct secured aims or exemptions.
	xamples No	d goods and f :: Major applian Describe	urnishings ces, furniture, linens	, china, kitchenware			
				dining room set, stove refrigerator, microw droom sets, tools, washer/dryer, snowblow		_	\$2,800.00
	No	: Televisions a		eo, stereo, and digital equipment; computers, pr nedia players, games	rinters, scanners; music	collection	ns; electronic devices
			2 TVs, laptop, ta	ablet, stereo, and 2 cell phones			\$750.00
				<u> </u>		_	

Official Form 106A/B Schedule A/B: Property

page 2

	ebtor 1 Nicholas James Koleas ebtor 2 Victoria Janice Koleas	Case number (if known)	
8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pict other collections, memorabilia, collectibles	tures, or other art objects; stamp, coin, or	baseball card collections;
	■ No □ Yes. Describe		
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles musical instruments ■ No □ Yes. Describe	s, pool tables, golf clubs, skis; canoes and	kayaks; carpentry tools;
10	. Firearms		
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ No ☐ Yes. Describe		
	Pistol		\$100.00
11	. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, access No Yes. Describe	sories	
	Clothing		\$500.00
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding ring □ No ■ Yes. Describe		
	Wedding rings and misc. jewelry		\$800.00
13	 Non-farm animals		
14	 Any other personal and household items you did not already list, includin ■ No □ Yes. Give specific information 	g any health aids you did not list	
15	5. Add the dollar value of all of your entries from Part 3, including any entri for Part 3. Write that number here		\$4,950.00
	art 4: Describe Your Financial Assets		
D	o you own or have any legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16	 Cash Examples: Money you have in your wallet, in your home, in a safe deposit box □ No ■ Yes. 	, and on hand when you file your petition	
		Cash	\$2,500.00

Official Form 106A/B Schedule A/B: Property

page 3

Debtor 1 Debtor 2	Nicholas James Victoria Janice k			Case number (if known)
Exar _				nts; certificates of deposit; shares in credit unions, brokerage ith the same institution, list each.	houses, and other similar
□ No ■ Yes	S			Institution name:	
		17.1.	Prepaid card	American Express Service	\$300.00
		17.2.	Checking	Educator's Credit Union	\$200.00
		17.3.	Savings	Educator's Credit Union	\$5.00
Exar ■ No	ls, mutual funds, or papers: Bond funds, inv	estme		erage firms, money market accounts me:	
joint ■ No	venture	nation a	nterests in incorpora about them	ated and unincorporated businesses, including an intere % of ownership:	st in an LLC, partnership, and
Nego Non- ■ No	otiable instruments inc	te bon lude p s are t ation a	ds and other negotia ersonal checks, cashio hose you cannot trans	able and non-negotiable instruments ers' checks, promissory notes, and money orders. efer to someone by signing or delivering them.	
<i>Exar</i> ■ No	s. List each account se	, ERIS	A, Keogh, 401(k), 403	8(b), thrift savings accounts, or other pension or profit-sharing	g plans
Your	rity deposits and pre share of all unused d	paym eposits	s you have made so th	Institution name: nat you may continue service or use from a company blic utilities (electric, gas, water), telecommunications compa	anies, or others
■ No □ Yes	S			Institution name or individual:	
■ No		•	, ,	to you, either for life or for a number of years)	
24. Intere	sts in an education I	RA, in		lified ABLE program, or under a qualified state tuition p	rogram.
■ No	S.C. §§ 530(b)(1), 529	, , ,	,,,,	Separately file the records of any interests.11 U.S.C. § 521(c	:) :
■ No	s, equitable or futures. Give specific inform			er than anything listed in line 1), and rights or powers ex	cercisable for your benefit
26. Pater	nts, copyrights, trade	emark	s, trade secrets, and	other intellectual property from royalties and licensing agreements	
☐ Yes	s. Give specific inform	nation a		Schedule A/B: Property	page 4

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Best Case Bankruptcy

	ebtor 1 ebtor 2	Nicholas James Koleas Victoria Janice Koleas		Case number (if known)	
		Violona damos residas			
27.		es, franchises, and other gen les: Building permits, exclusive		ldings, liquor licenses, professional licens	ees
		Give specific information abou	t them		
M	oney or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refo	unds owed to you			
	_	Give specific information about	them, including whether you already	filed the returns and the tax years	
29.	■ No		ony, spousal support, child support, r	naintenance, divorce settlement, property	settlement
30.	Examp No	benefits; unpaid loans you		, sick pay, vacation pay, workers' compe	nsation, Social Security
	☐ Yes.	Give specific information			
31.		ts in insurance policies eles: Health, disability, or life ins	surance; health savings account (HSA	s); credit, homeowner's, or renter's insura	nce
	_	Name the insurance company Compan	of each policy and list its value. y name:	Beneficiary:	Surrender or refund value:
32.	If you a		you from someone who has died ust, expect proceeds from a life insura	ance policy, or are currently entitled to rec	eive property because
	■ No □ Yes.	Give specific information			
33.	Examp ☐ No	les: Accidents, employment dis	er or not you have filed a lawsuit or sputes, insurance claims, or rights to		
	Yes.	Describe each claim			
			Small Claims case against Erin Book	Sierra — not paying for Photo	\$1,200.00
34.	■ No	contingent and unliquidated of Describe each claim	claims of every nature, including co	ounterclaims of the debtor and rights to	o set off claims
35.	■ No	ancial assets you did not alro	eady list		
36	S. Add tl	he dollar value of all of your		ntries for pages you have attached	\$4.20E.00
	for Pa	rt 4. Write that number here.			\$4,205.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Official Form 106A/B Schedule A/B: Property

page 5

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Debtor 1 Debtor 2	Nicholas James Koleas Victoria Janice Koleas		Case number (if known)	
37 Do vo i	u own or have any legal or equitable interest in any business-relate	ed property?	·	
	Go to Part 6.	a property :		
☐ Yes.	Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do y o	ou own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
■ No	o. Go to Part 7.			
☐ Ye	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
rait r.	besome Air Topolty Tod Own of Trave air interest in Trial Tod	DIG NOT EIST ABOVE		
	ou have other property of any kind you did not already list? mples: Season tickets, country club membership	•		
■ No	ripies. Season tickets, country clab membership			
	s. Give specific information			
	·		_	
54. Add	I the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55 P art	t 1: Total real estate, line 2			\$163,100.00
	t 2: Total vehicles, line 5	\$7,000.00		Ψ103,100.00
	t 3: Total personal and household items, line 15	\$4,950.00		
58. Par	t 4: Total financial assets, line 36	\$4,205.00		
59. Par	t 5: Total business-related property, line 45	\$0.00		
60. Par	t 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Par	t 7: Total other property not listed, line 54 +	\$0.00		
62. Tota	al personal property. Add lines 56 through 61	\$16,155.00	Copy personal property tota	\$16,155.00
63. Tot a	al of all property on Schedule A/B. Add line 55 + line 62			\$179,255.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this information to identify your case:							
Debtor 1							
Debtor 2 Victoria Janice Koleas							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F WISCONSIN				
Case number					☐ Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Specific laws that allow exemption Check only one box for each exemption.
234 North 10th Avenue West Bend, WI 53095 Washington County Line from <i>Schedule A/B</i> : 1.1	\$163,100.00	\$4,971.00 11 U.S.C. § 522(d)(1) 100% of fair market value, up to any applicable statutory limit
2007 Dodge Caravan 103,000 miles Line from <i>Schedule A/B</i> : 3.1	\$2,000.00	\$2,000.00 11 U.S.C. § 522(d)(2) 100% of fair market value, up to any applicable statutory limit
Living room set, dining room set, stove refrigerator, microwave, misc appliances, 2 bedroom sets, tools, washer/dryer, snowblower, lawnmower Line from <i>Schedule A/B</i> : 6.1	\$2,800.00	\$2,800.00 11 U.S.C. § 522(d)(3) 100% of fair market value, up to any applicable statutory limit
2 TVs, laptop, tablet, stereo, and 2 cell phones Line from <i>Schedule A/B</i> : 7.1	\$750.00	\$750.00 11 U.S.C. § 522(d)(3) 100% of fair market value, up to any applicable statutory limit
Pistol Line from Schedule A/B: 10.1	\$100.00	\$100.00 11 U.S.C. § 522(d)(5) 100% of fair market value, up to any applicable statutory limit

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Nicholas James Koleas Debtor 1 Victoria Janice Koleas Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Clothing 11 U.S.C. § 522(d)(3) \$500.00 \$500.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Wedding rings and misc. jewelry 11 U.S.C. § 522(d)(4) \$800.00 \$800.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Cash 11 U.S.C. § 522(d)(5) \$2,500.00 \$2,500.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Prepaid card: American Express 11 U.S.C. § 522(d)(5) \$300.00 \$300.00 Service Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Checking: Educator's Credit Union 11 U.S.C. § 522(d)(5) \$200.00 \$200.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Savings: Educator's Credit Union 11 U.S.C. § 522(d)(5) \$5.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit Small Claims case against Erin Sierra 11 U.S.C. § 522(d)(5) \$1,200.00 \$1,200.00

100% of fair market value, up to

	any applicable statutory limit	
3.	Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No)
	 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? □ No □ Yes 	

- not paying for Photo Book Line from Schedule A/B: 33.1

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Fill	in this information to identi	fy you	r case:				
Deb	tor 1 Nicholas Ja	mes l	Koleas				
	First Name		Middle Name	Last Name			
1	tor 2 Victoria Jar	ice K	Oleas Middle Name	Last Name			
(Зрос	ise ii, iiiiiig) Fiist Name						
Unit	ed States Bankruptcy Court for	or the:	EASTERN DISTRICT OF	F WISCONSIN			
Cas (if kno	e number 					_	if this is an ded filing
Offi	cial Form 106D						
	hedule D: Credit	ors	Who Have Clair	ms Secure	d by Property	y	12/15
is nee	complete and accurate as poseded, copy the Additional Page er (if known).						
1. Do	any creditors have claims secu	ired by	your property?				
	☐ No. Check this box and su	bmit th	nis form to the court with you	r other schedules. \	You have nothing else to	report on this form.	
	Yes. Fill in all of the inform	ation I	pelow.				
Part	1: List All Secured Clair	ns					
	st all secured claims. If a credito					Column B	Column C
	ach claim. If more than one credin as possible, list the claims in alp		• '		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Shellpoint Mortgage		Describe the property that se	ocures the claim:	\$158,129.00	\$163,100.00	\$0.00
	Servicing Creditor's Name		234 North 10th Avenue		Ψ100,120.00	<u> </u>	
			53095 Washington Cou	· .			
	55 Beattie Place, Suite 5	00	As of the date you file, the cla apply.	aim is: Check all that			
	Greenville, SC 29601		Contingent				
	Number, Street, City, State & Zip Coo	de	Unliquidated				
Who	owes the debt? Check one.		☐ Disputed Nature of lien. Check all that	annly			
	Pebtor 1 only		☐ An agreement you made (si		ecured		
_	ebtor 2 only		car loan)	3 3			
	Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax li	ien, mechanic's lien)			
ПА	t least one of the debtors and and	other	☐ Judgment lien from a lawsu				
	check if this claim relates to a community debt		Other (including a right to or	First Morto	gage		
Date	debt was incurred		Last 4 digits of accour	nt number 9134			
2.2	Vehicle Finance Services	3	Describe the property that se	cures the claim:	\$7,101.75	\$5,000.00	\$2,101.75
	Creditor's Name		2006 Chevrolet Impala 8	35001 miles			
	4141 South 108th Street Greenfield, WI 53228		As of the date you file, the clapply. Contingent	aim is: Check all that			
	Number, Street, City, State & Zip Coo	de	☐ Unliquidated				
Who	o owes the debt? Check one.		☐ Disputed Nature of lien. Check all that	apply			
_	Debtor 1 only		☐ An agreement you made (si		ecured		
_	Pebtor 2 only		car loan)	us.i as mortgage of St	505.0 u		
_	Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax li	ien, mechanic's lien)			
	t least one of the debtors and and	other	☐ Judgment lien from a lawsu				
	check if this claim relates to a community debt		Other (including a right to o	Purchase	Money Security Intere	est	
Date	debt was incurred 4/2017		Last 4 digits of accour	nt number			

Official Form 106D Schedule D: Creditors Who

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debto	r 1 Nicholas Jam	es Koleas		Case number (if known)
	First Name	Middle Name	Last Name	
Debto	r 2 Victoria Janic	e Koleas		
	First Name	Middle Name	Last Name	
	•		his page. Write that number I	nere: \$165,230.75
	s is the last page of y e that number here:	our form, add the dollar val	lue totals from all pages.	\$165,230.75
Part 2	List Others to B	se Notified for a Debt Th	at You Already Listed	
trying than o	to collect from you fo ne creditor for any of	or a debt you owe to someo	ne else, list the creditor in Pa	ot that you already listed in Part 1. For example, if a collection agency is rt 1, and then list the collection agency here. Similarly, if you have more ditors here. If you do not have additional persons to be notified for any
	N. N. I. O.	. 0'' 0'' 1 7'' 0 1		
_	Ditech Financial,	t, City, State & Zip Code LLC		On which line in Part 1 did you enter the creditor? 2.1
	PO Box 6154			Last 4 digits of account number
	Rapid City, SD 57	7709-6154		_
\Box				
_		t, City, State & Zip Code		On which line in Part 1 did you enter the creditor? 2.1
	Gray & Associate	*		
	16345 West Glen	dale Drive		Last 4 digits of account number
	New Berlin, WI 53	3151		

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill	in this inforn	nation to identify your ca	ase:						
Deb	otor 1	Nicholas James Kol	eas						
		First Name		lle Name Last Name					
Deb	otor 2	Victoria Janice Kole	as						
(Spo	use if, filing)	First Name	Midd	lle Name Last Name					
Uni	ted States Bar	nkruptcy Court for the:	EASTER	N DISTRICT OF WISCONSIN					
	se number _								
(if kn	own)					_	if this is an ed filing		
						amend	ea ming		
Off	icial Form	106F/F							
			ho Hay	ve Unsecured Claims			12/15		
				creditors with PRIORITY claims and Part 2					
eft.	Attach the Con			perty. If more space is needed, copy the Pa ve no information to report in a Part, do not					
Par	t 1: List Al	I of Your PRIORITY Uns	ecured C	Claims					
1.	Do any credito	ors have priority unsecured	claims ag	ainst you?					
	☐ No. Go to Pa	art 2.							
	Yes.								
2.	identify what typ possible, list the	pe of claim it is. If a claim has e claims in alphabetical order	both priori	or has more than one priority unsecured claim, ity and nonpriority amounts, list that claim here to the creditor's name. If you have more than the n, list the other creditors in Part 3.	and show both priority a	and nonpriority amount	s. As much as		
	(For an explana	ation of each type of claim, se	e the instru	uctions for this form in the instruction booklet.)					
	_	,		·	Total claim	Priority amount	Nonpriority amount		
2.1		Revenue Service		Last 4 digits of account number	\$27,667.26	\$27,667.26	\$0.00		
	•	editor's Name							
	P.O. Box	zed Insolvency Operati	on	When was the debt incurred?		-			
		phia, PA 19101-7346							
		treet City State Zip Code		As of the date you file, the claim is: Check	all that apply				
	Who incurred	the debt? Check one.		☐ Contingent					
	Debtor 1 o	nly		☐ Unliquidated					
	Debtor 2 o	nly		☐ Disputed					
	■ Debtor 1 a	and Debtor 2 only		Type of PRIORITY unsecured claim:					
		ne of the debtors and another		☐ Domestic support obligations					
		his claim is for a communi		■ Taxes and certain other debts you owe th	e government				
		nis claim is for a communi subject to offset?	ty aebt	☐ Claims for death or personal injury while y	-				
	No	nubject to onset?		Other. Specify					
				Federal Income Ta	xes	_			
	- 162	□ Yes Federal Income Taxes							

Debtor 2 Victoria Janice Koleas	Case number (if known)	
2.2 Wisconsin Department of Revenue	Last 4 digits of account number \$12,978.93 \$10,6	23.97 \$2,354.96
Priority Creditor's Name Special Procedures Unit P.O. Box 8901	When was the debt incurred?	
Madison, WI 53708-8901	As of the date was file the plates to OL 1 Hill I	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
_	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
\square At least one of the debtors and another	☐ Domestic support obligations	
■ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government	
Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated	
■ No	☐ Other. Specify	
□Yes	Income Taxes	
unsecured claim, list the creditor separately for each of	e alphabetical order of the creditor who holds each claim. If a creditor has more the laim. For each claim listed, identify what type of claim it is. Do not list claims already in creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	
4.1 AES/Suntrust Bank	Last 4 digits of account number 1PA0	e Continuation Page of
Nonpriority Creditor's Name PO Box 61047	Last 4 digits of account number 1PA0 When was the debt incurred?	e Continuation Page of Total claim
Nonpriority Creditor's Name	<u> </u>	e Continuation Page of Total claim
Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply	e Continuation Page of Total claim
Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent	e Continuation Page of Total claim
Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated	e Continuation Page of Total claim
Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent	e Continuation Page of Total claim
Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	e Continuation Page of Total claim
Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	Total claim \$38,115.00
Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not	Total claim \$38,115.00
Nonpriority Creditor's Name PO Box 61047 Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	Total claim \$38,115.00

Noorpicity Craditor's Name 1940 North Main Street West Bond, WI 53,090 Number Street City State 2 Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another	Debto Debto	r 1 Nicholas James Koleas r 2 Victoria Janice Koleas	Case number (if known)	
1940 North Main Street West Bond, WI 53090 Number Street (Py State 2g Code Who incurred the debt? Check one. Debtor 2 only Debtor 2 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and Debtor 6 and Debtor 7 and Debtor 7 and Debtor 7 and Debtor 7 and Debtor 8 and 2 and	4.2		Last 4 digits of account number	\$251.25
Number Street City State Zip Code No incurred the debt? Check one. Debter 1 only Debter 2 only Debter 1 and Debter 2 only Debter 2 only Debter 3 and 2 only Debter 3 and 2 only Debter 4 and 2 only Debter 3 only Debter 4 only Debter 4 only Debter 5 only Debter 6 only De		1940 North Main Street	When was the debt incurred?	
Debtor 1 only			As of the date you file, the claim is: Check all that apply	
Debtor 2 only		Who incurred the debt? Check one.		
Debtor 2 only		☐ Debtor 1 only	☐ Contingent	
Disputed Disputed Type of NONPRIORITY unsecured claim: Student loans Student loans Disputed Disputed Student loans Disputed Student loans Disputed Disputed Student loans Disputed		Debtor 2 only		
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonpriority Creditor's Name P.O. Box 297812 Nomber Street City State Zip Code Who incurred the debtor and another Check if this claim subject to offset? Noppriority Creditor's Name P.O. Box 257812 Nomber Street City State Zip Code Who incurred the debtor and another Check if this claim is for a community debt Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only American Express Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debtors and another Debtor 1 only Debtor 2 only Check if this claim is for a community debt Street City State Zip Code Who incurred the debt? Check if this claim is for a community Debtor 2 only Check if this claim is for a community Debtor 2 only Check if this claim is for a community Debtor 2 only Check if this claim is for a community Debtor 2 only Check if this claim is for a community Debtor 2 only Check if this claim is for a community Debtor 2 only Check if this claim is for a community Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1		■ Debtor 1 and Debtor 2 only	•	
Check if this claim is for a community debt is the claim subject to offset? No		☐ At least one of the debtors and another	•	
Obligations arising out of a separation agreement or divorce that you did not report as priority claims		_	••	
Is the claim subject to offset? report as priority claims report as priority claims Pobs to pension or profit-sharing plans, and other similar debts Other. Specify Outstanding Debt Owed		•		
American Express Nonpriority Creditor's Name P.O. Box 297812 Fort Lauderdale, FL 33329-7812 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Street City State Zip Code Who incurred the debt? Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 onlor Street City State Zip Code Nonpriority Creditor's Name PO Box 1566 Manitowoc, WI 54221-1566 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 on		Is the claim subject to offset?		
American Express Nonpriority Creditor's Name P. O. Box 297812 Fort Lauderdale, FL 33329-7812 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 she claim subject to offset? Americallect Nonpriority Creditor's Name PO Box 1566 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Other. Specify Charge account 4.4		■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
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debt Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Account- West Bend Clinic Inc., Froedtert Health Clinic West, Columbia St.		Check if this claim is for a community	☐ Student loans	
Collection Account- West Bend Clinic Inc., Froedtert Health Clinic West, Columbia St.		debt		
Froedtert Health Clinic West, Columbia St.		■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Mary's		□Yes		

Debto Debto	71 Nicholas James Koleas Victoria Janice Koleas	Case number (if known)	
4.5	Ashley Olivedo	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name 7928 Gina Drive Racine, WI 53406	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Outstanding Debt Owed	
4.6	Associated Bank	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 200 North Adams Street Green Bay, WI 54301	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Outstanding Debt Owed	
4.7	AT&T	Last 4 digits of account number	\$180.13
	Nonpriority Creditor's Name PO Box5093	When was the debt incurred?	
	Carol Stream, IL 60197-6416 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only		
	Debtor 2 only	Contingent	
	■ Debtor 1 and Debtor 2 only	Unliquidated	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Outstanding Debt Owed	

Debto Debto	r 1 Nicholas James Koleas r 2 Victoria Janice Koleas	Case number (if known)	
4.8	Aurora Health Care	Last 4 digits of account number 1369	\$11,757.47
	Nonpriority Creditor's Name PO Box 091700 Milwaukee, WI 53209-8700	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Services	
4.9	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number 1754	\$1,868.49
	152 East Shore Drive 12017 0380 Glen Allen, VA 23059	When was the debt incurred? 2014	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Civil Judgment	
4.1	Capital One Bank	Last 4 digits of account number 7717	Unknown
	Nonpriority Creditor's Name 10700 Capital One Way	When was the debt incurred?	
	Glen Allen, VA 23060 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no of the date year me, the claim is: officer all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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	or 1 Nicholas James Koleas or 2 Victoria Janice Koleas	Case number (if known)	
4.1	Central Collection Corporation	Last 4 digits of account number	\$60.00
1	Nonpriority Creditor's Name		
	3055 North Brookfield Road, Suite 31 Brookfield, WI 53045-3336	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Account	
4.1	Chana Card	2440	Unknown
2	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number 2418	Unknown
	P.O. Box 15298	When was the debt incurred? 2015	
	Wilmington, DE 19850-5298		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only		
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card Purchases	
	Li res	Other. Specify Oreal Card 1 dichases	
4.1	City of Milwaukee Violations Bureau	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name PO Box 346	When was the debt incurred?	
	Milwaukee, WI 53201-0346	Then was the dest mounted.	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Parking tickets	

Victoria Janice Koleas Victoria Janice Koleas	Case number (if known)	
Commercial Collections	Last 4 digits of account number	\$14,579.41
Nonpriority Creditor's Name 500 Virginia Drive Suite 514	When was the debt incurred?	
Fort Washington, PA 19034		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Outstanding Debt Owed	
Direct Loans (Department of		
Education)	Last 4 digits of account number	Unknowr
Nonpriority Creditor's Name P.O. Box 5609	When was the debt incurred?	
Greenville, TX 75403-5609 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the damnis. Oncot all that appry	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	■ Student loans	
debt	Dobligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	☐ Other. Specify	
	Student loan	
Discover Financial Services	Last 4 digits of account number 0033	\$1,395.25
Nonpriority Creditor's Name PO Box 6103	When was the debt incurred?	
Carol Stream, IL 60197		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	_	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
_	<u></u>	
_	Student loans	

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btor 2 Victoria Janice Koleas	Case number (if known)	
Financial Control Services	Last 4 digits of account number 97	\$149.00
Nonpriority Creditor's Name N114 W19225 Clinton Drive	When was the debt incurred?	
Germantown, WI 53022 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the stain is. Offect an that apply	
Debtor 1 only	Пол	
Debtor 2 only	☐ Contingent ☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection Account - Merry Family Dentistry	
FMA Alliance, LTD. Nonpriority Creditor's Name	Last 4 digits of account number 2624	\$1,555.02
12339 Cutten Road Houston, TX 77066	When was the debt incurred? 2016	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collection account- US Bank	
Froedtert & Medical College of		
Wisconsin Nonpriority Creditor's Name	Last 4 digits of account number 0029	\$399.2
10000 Innovatio n Drive Milwaukee, WI 53226	When was the debt incurred? 2017	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Services	

Froedtert & Medical College of Wisconsin	Last 4 digits of account number 8580	\$55.00
Nonpriority Creditor's Name 10000 Innovation Drive	When was the debt incurred?	
Milwaukee, WI 53226 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Services	
	———	
Froedtert Health	Last 4 digits of account number 7061	\$1,197.96
Nonpriority Creditor's Name 400 Woodland Prime Suite 103	When was the debt incurred? 2017	
N74 W12501 Leatherwood Court		
Menomonee Falls, WI 53051		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
Debtor 2 only	☐ Contingent	
	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Services	
Great Lakes Educational Loan	Last 4 digits of account number 1887	¢24.444.00
Services Nonpriority Creditor's Name		\$31,141.0
P.O. Box 7860 Madison, WI 53707 Number Street City State Zip Code	When was the debt incurred? 2007	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	Student loans	
■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	_ sale to periore or promited plants, and outlet diffillal abbid	

	
Last 4 digits of account number	\$4,874.0
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
As of the date you me, the damnis. Oneok all that apply	
-	
-	
·	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
lacksquare Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Outstanding Debt Owed	
	\$174.6
Last 4 digits of account number	Φ1/4.0
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not	
report as priority claims	
Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Outstanding Debt Owed	
Last 4 digits of account number 6235	\$228.0
when was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
Contingent	
-	
•	
••	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
iopolicas priority viamino	
Debts to pension or profit-sharing plans, and other similar debts	
	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Outstanding Debt Owed Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Outstanding Debt Owed Last 4 digits of account number 6235 When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims On the claim is: Check all that apply

ebtor	Nicholas James Koleas Victoria Janice Koleas	Case number (if known)	
2	Infinity Healthcare Physicians SC	Last 4 digits of account number 3244	\$229.28
	Nonpriority Creditor's Name PO Box 078894 Milyaydoo NU 53378 8804	When was the debt incurred? 2017	
-	Milwaukee, WI 53278-8894 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you descripted as priority claims	id not
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical Services	
2	Journal Broadcast Group Inc.	Last 4 digits of account number 3827	\$3,494.36
	Nonpriority Creditor's Name 333 West State Street Milwaukee, WI 53203	When was the debt incurred? 2015	
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you d report as priority claims	id not
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Civil Judgment	
2	Landmark Credit Union	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name P.O. Box 510870 New Berlin, WI 53151	When was the debt incurred? 8/2015	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you d report as priority claims	id not
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	— 110	First Francisco	

otor 2 Victoria Janice Koleas		Case number (if known)	
Lighthouse Clinic, LLC	Last 4 digits of account number	1476	\$198.63
Nonpriority Creditor's Name 6400 Industrial Loop Greendale, WI 53129	When was the debt incurred?	2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
■ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical Ser	rvices	
New Penn Financial LLC	Last 4 digits of account number	0600	Unknowr
Nonpriority Creditor's Name 55 Beattie Place, Suite 110 Greenville, SC 29601	When was the debt incurred?	9/24/2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Civil Judgm	ent	
Newtek	Last 4 digits of account number		\$3,859.94
Nonpriority Creditor's Name 6737 West Washington street	When was the debt incurred?		
Suite 2275 Milwaukee, WI 53214 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Signature L	oan	

Optimum Outcomes Inc.	Last 4 digits of account number	8685	\$1,585.4
Nonpriority Creditor's Name PO Box 58015	When was the debt incurred?	2017	
Raleigh, NC 27658	when was the dept incurred?	2017	
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	a plane, and other similar debts	
	·		
☐ Yes	Other. Specify Collection a	ccount	
Professional Account Management	Last 4 digits of account number	8615	\$290.00
Nonpriority Creditor's Name			· · · · · · · · · · · · · · · · · · ·
P.O. Box 2080	When was the debt incurred?		
Milwaukee, WI 53201 Number Street City State Zip Code	As of the date you file, the claim i	e. Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	5. Спеск ан тат арргу	
Debtor 1 only			
Debtor 2 only	Contingent		
_	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	a plans, and other similar debts	
■ No □ Yes	Other. Specify Collection A	• · · · · · · · · · · · · · · · · · · ·	
	Other. Specify		
Regus	Last 4 digits of account number	unknown	\$14,579.41
Nonpriority Creditor's Name			
11414 West Parkplace Suite 202 Milwaukee, WI 53224	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only			
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	Student loans	. O.G	
Check if this claim is for a community debt		ration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	iration agreement or divorce that you did not	
•	<u></u>	g plans, and other similar debts	
■ No	Debts to pension of profit-sharin		

r 2 Victoria Janice Koleas	Case number (if known)		
River Road Storage	Last 4 digits of account number	\$213.60	
Nonpriority Creditor's Name 820 North River Road	When was the debt incurred?		
West Bend, WI 53090 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only			
Debtor 2 only	Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:		
■ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	■ Other. Specify Outstanding Debt Owed		
Rogers Memorial Hospital	Last 4 digits of account number 0804	\$7,036.09	
Nonpriority Creditor's Name 34700 Valley Road	When was the debt incurred? 2008		
Oconomowoc, WI 53066 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	■ Other. Specify Civil Judgment		
Smart Reach Digital	Last 4 digits of account number	\$3,366.90	
Nonpriority Creditor's Name 11800 West Grange Avenue	When was the debt incurred?		
Hales Corners, WI 53130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	\square Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other. Specify Outstanding Debt Owed		

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tor 2 Victoria Janice Koleas	Case number (if known)	Case number (if known)		
Spectrum	Last 4 digits of account number 8063	\$167.59		
Nonpriority Creditor's Name 1600 Dublin Road	When was the debt incurred?			
Columbus, OH 43215 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one. ☐ Debtor 1 only				
☐ Debtor 2 only	☐ Contingent ☐ Unliquidated			
_				
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify Outstanding Debt Owed			
St. Joseph's Hospital	Last 4 digits of account number Unknown	Unknowr		
Nonpriority Creditor's Name				
Patient Accounts 5000 W. Chambers Street	When was the debt incurred? Unknown			
Milwaukee, WI 53210-1688	- Accepted to the configuration of the state			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only	_			
☐ Debtor 2 only	☐ Contingent			
<u> </u>	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 			
■ No	Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify Notice Only			
Stripe	Last 4 digits of account number UNKNOWN	\$7,670.00		
Nonpriority Creditor's Name 510 Townsend Street	When was the debt incurred?	, ,		
San Francisco, CA 94103				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
■ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
No	☐ Debts to pension or profit-sharing plans, and other similar debts			
☐ Yes	■ Other. Specify Outstanding Debt Owed			

or 2 Victoria Janice Koleas	Case number (if known)		
SunTrust Bank	Last 4 digits of account number	\$1,585.28	
Nonpriority Creditor's Name			
PO Box 291286	When was the debt incurred?		
Nashville, TN 37229 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	As of the date you file, the claim is. Offect all that apply		
☐ Debtor 1 only	□ 0t		
Debtor 2 only	☐ Contingent		
,	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:		
At least one of the debtors and another	_		
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
Yes	☐ Other. Specify		
	Student Loan		
TJX Rewards/SYNCB	Last 4 digits of account number 3876	\$3,624.1	
Nonpriority Creditor's Name		Ψ0,02	
PO Box 530949	When was the debt incurred? 2016		
Atlanta, GA 30353			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only			
	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
■ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a separation agreement or divorce that you did not		
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	■ Other. Specify Charge account		
Universal Processing Services of WI			
LLC	Last 4 digits of account number	\$9,321.9	
Nonpriority Creditor's Name			
754 North 4th Street	When was the debt incurred?		
Milwaukee, WI 53203 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	76 of the date you me, the stannie. Onesk an wat apply		
☐ Debtor 1 only	Пол		
Debtor 2 only	Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
☐ At least one of the debtors and another	Disputed		
	Type of NONPRIORITY unsecured claim: ☐ Student loans		
Check if this claim is for a community debt	_		
Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other. Specify Outstanding Debt Owed		

Best Case Bankruptcy

Debtor 1 Nicholas James Koleas Debtor 2 Victoria Janice Koleas		Case number (if known)			
4.4 Wa Francisco			#4 202 00		
We Energies Nonpriority Creditor's Name	Last 4 digits of account nu	mber	\$4,392.00		
Attn: Bankruptcy Dept A130 P.O. Box 2046 Milwaukee, WI 53201-2046	When was the debt incurre	d?	_		
Number Street City State Zip Code	As of the date you file, the	claim is: Check all that apply			
Who incurred the debt? Check one.	•	,			
Debtor 1 only	☐ Contingent				
Debtor 2 only					
■ Debtor 1 and Debtor 2 only	☐ Unliquidated				
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:				
_	Ta community Student loans Obligations arising out of a separation agreement or divorce that you did not				
Check if this claim is for a community debt					
Is the claim subject to offset?					
No					
☐ Yes	Other. Specify Utility	Bill	_		
Part 3: List Others to Be Notified About a	Dobt That You Already Listed				
. Use this page only if you have others to be notifie is trying to collect from you for a debt you owe to have more than one creditor for any of the debts notified for any debts in Parts 1 or 2, do not fill out	ed about your bankruptcy, for a deb o someone else, list the original cree that you listed in Parts 1 or 2, list th ut or submit this page.	ditor in Parts 1 or 2, then list the collection agen e additional creditors here. If you do not have a	cy here. Similarly, if you		
Name and Address	On which entry in Part 1 or Part 2 o				
American Education Services Payment Center	Line 4.41 of (Check one):	Part 1: Creditors with Priority Unsecured Cl			
P.O. Box 2461		■ Part 2: Creditors with Nonpriority Unsecured	d Claims		
Harrisburg, PA 17130					
	Last 4 digits of account number				
Name and Address Columbia Saint Mary's	On which entry in Part 1 or Part 2 or	, <u> </u>			
PO Box 78101	Line <u>4.4</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Cla ■ Part 2: Creditors with Nonpriority Unsecured			
Milwaukee, WI 53278-0101		Part 2: Creditors with Nonpriority Unsecured	1 Claims		
	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	· _			
Downtown Family Dental Dr. Timothy J. Merry	Line 4.17 of (Check one):	Part 1: Creditors with Priority Unsecured Cl			
309 North 7th Avenue		■ Part 2: Creditors with Nonpriority Unsecured	d Claims		
West Bend, WI 53095					
	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?			
Froedtert Health Medical Group	Line $\underline{4.4}$ of (Check one):	☐ Part 1: Creditors with Priority Unsecured Cla	aims		
PO Box 9030 Menomonee Falls, WI 53052		Part 2: Creditors with Nonpriority Unsecured	d Claims		
ivieriorilonee Fails, Wi 55052	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	did you list the original graditor?			
Kohn Law Firm S.C.	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Cl	aims		
735 North Water Street	` ,	■ Part 2: Creditors with Nonpriority Unsecured			
Suite 1300		an an an an analysis with the special of			
Milwaukee, WI 53202	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?			
Kohner, Mann & Kailas SC	Line 4.27 of (Check one):	Part 1: Creditors with Priority Unsecured Cl	aims		
Washington Bldg 2nd Fl	·	■ Part 2: Creditors with Nonpriority Unsecured			
4650 N Port Washington		and the second s			
Milwaukee, WI 53212	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2	tid you list the original creditor?			

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 17 of 19

	Case number (if known)
Line <u>4.9</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	
Line 4.11 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
On which entry in Part 1 or Part 2 Line 4.36 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
On which entry in Part 1 or Part 2 Line <u>4.42</u> of (<i>Check one</i>):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
On which entry in Part 1 or Part 2 Line 4.18 of (Check one): Last 4 digits of account number	did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
On which entry in Part 1 or Part 2 Line 4.4 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
On which entry in Part 1 or Part 2 Line 2.2 of (Check one):	did you list the original creditor? ■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.11 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.36 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.42 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.18 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.15 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.4 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2 Line 4.4 of (Check one): Last 4 digits of account number

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 40,646.19
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 40,646.19
				Total Claim
Total	6f.	Student loans	6f.	\$ 70,841.28

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 18 of 19

Debtor 1 Nicholas James Koleas Debtor 2 Victoria Janice Koleas

Case number (if known)

claims from Part 2

- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount here.
- Total Nonpriority. Add lines 6f through 6i.

6g.	\$ 0.00
6h.	\$ 0.00
6i.	\$ 118,746.49

189,587.77

Page 38 of 70

Fill in this inform	nation to identify your	case:		
Debtor 1	Nicholas James Ko	oleas		
	First Name	Middle Name	Last Name	
Debtor 2	Victoria Janice Kol	eas		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT C	PF WISCONSIN	
Case number				☐ Check if this is an amended filing
				amendeuming

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	,				
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	,			2 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Fill in this	information to identify your	case:			
Debtor 1	Nicholas James K				
Debtor 2	First Name Victoria Janice Ko	Middle Name	Last Name		
(Spouse if, filir		Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	EASTERN DISTRICT OF W	/ISCONSIN		
_					
Case numl					☐ Check if this is an
					amended filing
Officia	l Form 106H				
		obtoro			
Sched	lule H: Your Cod	eptors			12/15
people are ill it out, a your name	filing together, both are equ nd number the entries in the and case number (if known)	ally responsible for supplying boxes on the left. Attach the left. Answer every question.	ng correct information e Additional Page to	on. If more space is ne this page. On the top	te as possible. If two married leded, copy the Additional Page, of any Additional Pages, write
1. 00	you have any codebtors? (If	you are filing a joint case, do n	not list eitner spouse a	as a codeptor.	
■ No					
☐ Yes	3				
	hin the last 8 years, have you a, California, Idaho, Louisiana				states and territories include
□ No.	Go to line 3.				
_	s. Did your spouse, former spo	use, or legal equivalent live wit	th you at the time?		
	□ N.				
	□ No ■ Yes.				
	— 165.				
	In which community stat Krisstina Stein	e or territory did you live?	Wisconsin	Fill in the name and	d current address of that person.
	Name of your spouse, former sp Number, Street, City, State & Zip				
	In which community state Nicholas Koleas	e or territory did you live?	Wisconsin	Fill in the name and	d current address of that person.
	Name of your spouse, former sp Number, Street, City, State & Zip				
		e or territory did you live?	Wisconsin	. Fill in the name and	d current address of that person.
	Victoria Robertson	, ,			'
	Name of your spouse, former sp Number, Street, City, State & Zip				
in line Form	2 again as a codebtor only i	f that person is a guarantor	or cosigner. Make s	ure you have listed the	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt sthat apply:
				_	
3.1	Name			Schedule D, line	
				☐ Schedule E/F, lir☐ Schedule G, line	
-	Number Street			-	-
	City	State	ZIP Code		
3.2				_ ☐ Schedule D, line	
Official Fo	orm 106H		Schedule H: Your (Codebtors	Page 1 of 2

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Case number (if known)

			_	`
Additional	Page to List More Codeb	tors		
Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt Check all schedules that apply:
Name				☐ Schedule E/F, line
Number	Street			-
City	State		ZIP Code	

Schedule H: Your Codebtors

Fill in this informa	ation to identify your case:	
Debtor 1	Nicholas James Koleas	
Debtor 2 (Spouse, if filing)	Victoria Janice Koleas	
United States Bar	nkruptcy Court for the: EASTERN DISTRICT OF WISCONSIN	
Case number		Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	orm 106l	MM / DD/ YYYY
Schedule	e I: Your Income	12/15

page 1

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ■ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Self-Contractor Server Include part-time, seasonal, or self-employed work. **Employer's name** Best Version Media From Scratch Catering **Employer's address** Occupation may include student 150 N Pr19355 Janacek Court PO Box 895 or homemaker, if it applies. Brookfield, WI 53045 Grafton, WI 53024 How long employed there? 8 months 1 year

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 372.00 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 3. 0.00 Calculate gross Income. Add line 2 + line 3. 0.00 372.00

Official Form 106I Schedule I: Your Income Case 19-20844-beh Doc 1 Filed 01/31/19 Page 42 of 70

Case number (if known)

					Fo	or Debtor 1		or Debtor on-filing s		
	Сору	y line 4 here		4.	\$	0.00	\$		372.00	-
5.	Lieta	all payrall daduations.			-					_
Э.		all payroll deductions:		- -	Φ.	2.22	Φ.		00.47	
	5a.	Tax, Medicare, and Social Security deductions		5a.	\$	0.00	\$		28.47	_
	5b.	Mandatory contributions for retirement plans		5b.	\$	0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans		5c.	\$	0.00	\$		0.00	_
	5d. 5e.	Required repayments of retirement fund loans Insurance		5d. 5e.	\$ \$	0.00	\$		0.00	_
	5f.	Domestic support obligations		5f.	\$	0.00	\$		0.00	_
	5g.	Union dues		5g.	\$	0.00	φ		0.00	_
	5g. 5h.	Other deductions. Specify:		5h.+		0.00	Ψ + \$		0.00	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+	Ef Ea Eh	6.	Ψ. \$	0.00	· Ψ			_
7.		• •	· ·	7.	\$		φ \$		28.47	_
		ulate total monthly take-home pay. Subtract line 6 from	om line 4.	1.	Φ.	0.00	Φ		343.53	_
8.	List a	all other income regularly received: Net income from rental property and from operatir profession, or farm Attach a statement for each property and business shireceipts, ordinary and necessary business expenses, monthly net income.	owing gross	8a.	\$	4,000.00	\$		0.00	
	8b.	Interest and dividends		8b.	\$	0.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing speregularly receive Include alimony, spousal support, child support, maint settlement, and property settlement.	-	8c.	\$	0.00	\$		0.00	_
	8d.	Unemployment compensation		8d.	\$	0.00	\$		0.00	_
	8e.	Social Security		8e.	\$	0.00	\$		0.00	_
	8f.	Other government assistance that you regularly re Include cash assistance and the value (if known) of ar that you receive, such as food stamps (benefits under Nutrition Assistance Program) or housing subsidies. Specify:	ny non-cash assistance	8f.	\$	0.00	\$		0.00	-
	8g.	Pension or retirement income		8g.	\$	0.00	\$		0.00	_
	8h.	Other monthly income. Specify:		8h.+	\$	0.00	+ \$		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+	8h.	9.	\$_	4,000.00	\$		0.0	0
10.	Calc	ulate monthly income. Add line 7 + line 9.	10	0. \$		4,000.00 + \$		343.53	= \$	4,343.53
		the entries in line 10 for Debtor 1 and Debtor 2 or non-fi		• •		1,000.00		0 10.00		1,010.00
11.	State Include other	e all other regular contributions to the expenses that de contributions from an unmarried partner, members or friends or relatives. ot include any amounts already included in lines 2-10 or	t you list in Schedule J f your household, your d	lepen		.,	•			0.00
12.		the amount in the last column of line 10 to the amount that amount on the Summary of Schedules and Statisties							\$	
13.	Do y	ou expect an increase or decrease within the year a	fter you file this form?						monthi	y income
		No.								
		Yes. Explain:								

Official Form 106I

Fill	in this informa	ation to identify yo	our case:					
Deb	otor 1	Nicholas Jam	es Kolea	e e		Ch	eck if this is:	
		14ionolao cam	100 110104	<u> </u>			An amended filing	
Deb	otor 2	Victoria Janic	e Koleas					owing postpetition chapter
(Spo	ouse, if filing)						13 expenses as o	f the following date:
Unit	ted States Bank	ruptcy Court for the:	EASTE	RN DISTRICT OF WISCO	NSIN		MM / DD / YYYY	
l	se number nown)							
		4001						
		orm 106J • J: Your l	 Evner	neae				12/15
Be info	as complete ormation. If m	and accurate as	possible.	If two married people ar ch another sheet to this				for supplying correct
Par	t 1: Desc	ribe Your House	hold					
1.	Is this a join		iioiu					
	☐ No. Go to							
	Yes. Doe	es Debtor 2 live i	in a separ	ate household?				
	■ N							
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate Housel	nold of De	ebtor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 1		Dependent's age	Does dependent live with you?
	Do not ototo	tha						□ No
	Do not state dependents				Daughter		2	■ Yes
	•							□ No
								☐ Yes
								□ No
								_
								□ No
_	Da							_
3.	•	penses include If people other th	han	No				
	•	d your depender		Yes				
Est exp	imate your e		our bankrı	uptcy filing date unless y				napter 13 case to report of the form and fill in the
the		h assistance and		government assistance it sluded it on Schedule I: Y			Your ex	penses
, -,		,						
4.		or home ownersl and any rent for the		ses for your residence. In	nclude first mortgage	4.	\$	1,062.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		erty, homeowner's				4b.	\$	0.00
		maintenance, re				4c.	\$	0.00
_		owner's associati				4d.	·	0.00
5.	Additional	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	*	0.00

Schedule J: Your Expenses Official Form 106J

ebtor 1	Nicholas James Kole				
ebtor 2	Victoria Janice Kolea	S	Case num	ber (if known)	
. Utili	tios:				
. 6a.	Electricity, heat, natural	gas	6a.	\$	275.00
6b.	Water, sewer, garbage	_	6b.	·	50.00
6c.		Internet, satellite, and cable services	6c.	· <u> </u>	260.00
6d.	Other. Specify:		6d.		0.00
	d and housekeeping sup	onlies		\$	450.00
	dcare and children's edi	•	8.	·	0.00
-	hing, laundry, and dry c		9.	· -	25.00
	onal care products and		10.	·	50.00
	ical and dental expense		11.	·	65.00
	•	maintenance, bus or train fare.		<u> </u>	00.00
	ot include car payments.	maintenance, bus or train raic.	12.	\$	250.00
		ation, newspapers, magazines, and books	13.	\$	0.00
	ritable contributions and		14.	\$	0.00
	rance.			· -	
Do r	ot include insurance dedu	ucted from your pay or included in lines 4 or 2	0.		
15a	Life insurance		15a.	\$	0.00
15b	Health insurance		15b.	\$	100.00
15c.	Vehicle insurance		15c.	\$	270.00
15d	Other insurance. Specify	<u>r</u> .	15d.	\$	0.00
Tax	es. Do not include taxes d	educted from your pay or included in lines 4 of	or 20.		
Spe		, ,	16.	\$	0.00
	allment or lease paymen				
17a	Car payments for Vehic	le 1	17a.	\$	0.00
17b	Car payments for Vehic	le 2	17b.	\$	0.00
17c.	Other. Specify:		17c.	\$	0.00
17d	Other. Specify:		17d.	\$	0.00
		maintenance, and support that you did not			0.00
		line 5, Schedule I, Your Income (Official Fo		·	0.00
		o support others who do not live with you.		\$	0.00
Spe			19.		
		s not included in lines 4 or 5 of this form o			0.00
	Mortgages on other pro	репу	20a.		0.00
	Real estate taxes		20b.		0.00
	Property, homeowner's,		20c.	·	0.00
	Maintenance, repair, an		20d.	· -	0.00
	Homeowner's association	on or condominium dues	20e.	·	0.00
Oth	er: Specify:		21.	+\$	0.00
Cald	ulate your monthly expe	enses			
	Add lines 4 through 21.	3.1000		\$	2.857.00
	· ·	penses for Debtor 2), if any, from Official Forr	n 106.l-2	\$	2,007.00
	. ,	, , , , , , , , , , , , , , , , , , , ,	11 1000 2		
22C.	Add line 22a and 22b. Tr	ne result is your monthly expenses.		\$	2,857.00
Cald	ulate your monthly net i	income.			
23a	Copy line 12 (your comi	bined monthly income) from Schedule I.	23a.	\$	4,343.53
23b	Copy your monthly expe	enses from line 22c above.	23b.	-\$	2,857.00
23c.		expenses from your monthly income.	~ =		1 400 50
	The result is your month	nly net income.	23c.	\$	1,486.53
For e	xample, do you expect to finistication to the terms of your m	or decrease in your expenses within the yesh paying for your car loan within the year or do you nortgage?			ase or decrease because of a
= N	_				
	es. Explain here	9:			

Official Form 106J Schedule J: Your Expenses page 2

- :::				
Fill in this info	rmation to identify your	case:		
Debtor 1	Nicholas James K	oleas		
	First Name	Middle Name	Last Name	
Debtor 2	Victoria Janice Ko	leas		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT (OF WISCONSIN	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official For Declara	-	ın Individua	l Debtor's Schedules	12/15
f two married p	eople are filing togethe	r, both are equally respo	onsible for supplying correct information.	
ears, or both.	ey or property by fraud i 18 U.S.C. §§ 152, 1341, <i>d</i> gn Below		kruptcy case can result in fines up to \$250,0	00, or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an atto	orney to help you fill out bankruptcy forms?	
■ No				
☐ Yes.	Name of person			kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and schedules filed with this declarati	on and
X /s/ Nic	cholas James Koleas		X /s/ Victoria Janice Koleas	
Nichol	las James Koleas		Victoria Janice Koleas	
Signatu	ure of Debtor 1		Signature of Debtor 2	
Date	January 31, 2019		Date January 31, 2019	
-				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Eil	in this inform	nation to identify you	r case:			
De	btor 1	Nicholas James k	Noteas Middle Name	Last Name		
De	btor 2	Victoria Janice Ko	oleas			
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	kruptcy Court for the:	EASTERN DISTRICT OF	WISCONSIN		
	se number				_	theck if this is an mended filing
St Be info	as complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup or additional pages, write you	
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	MarriedNot married	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory	
	□ No					
		ke sure vou fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H)		
	- 165. IVIA	ke sule you illi out oci	ledule 11. Tour Codebiors (O	iliciai i olili 10011).		
Pa	rt 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$600.00	■ Wages, commissions, bonuses, tips	\$150.00
			Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.		s income re deductions and sions)	Sources of inc		Gross income (before deductions and exclusions)
	r last calen nuary 1 to	dar year: December	31, 2018)	☐ Wages, commissions, bonuses, tips		\$32,725.00	■ Wages, combonuses, tips	missions,	\$3,274.00
				Operating a business			☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips		\$95,718.00	☐ Wages, combonuses, tips	missions,	\$0.00
				☐ Operating a business			☐ Operating a	business	
	winnings.	f you are fil	ng a joint cas	pensions; rental income; inte e and you have income that me from each source separa	you recei	ved together, list it	only once under Do	ebtor 1.	d gambling and lottery
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
		dar year be December		Pension Withdrawal		\$160.00			
Pai	Are either No. No. ■ Yes.	Debtor 1's Neither Deindividual During the No. Yes * Subject Debtor 1 c During the No. Yes	or Debtor 2 ebtor 1 nor E orimarily for a 90 days befor Go to line 7 List below e paid that cr not include to adjustmen or Debtor 2 o 90 days befor Go to line 7 List below e include pay attorney for	each creditor to whom you pa editor. Do not include payme payments to an attorney for to con 4/01/19 and every 3 year r both have primarily constructions re you filed for bankruptcy, do each creditor to whom you pa ments for domestic support of this bankruptcy case.	er debts? umer deb bld purpos lid you pat aid a total nts for do this bankr rs after the umer deb lid you pat	ots. Consumer debase." y any creditor a tot of \$6,425* or more mestic support obliuptcy case. at for cases filed or ots. y any creditor a tot of \$600 or more ares, such as child supports.	al of \$6,425* or mo in one or more pay gations, such as ch n or after the date ch al of \$600 or more? and the total amount oport and alimony.	re? /ments and t nild support a f adjustment o you paid tha Also, do not	he total amount you and alimony. Also, do t. t creditor. Do not include payments to an
	Creditor'	s Name and	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	ebtor 2 Victoria Janice Koleas Victoria Janice Koleas		Cas	se number (if known)		
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general pof which you are an officer, director, person is a business you operate as a sole proprietor. alimony.	partners; relatives of any ge in control, or owner of 20%	eneral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one fo
	■ No □ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		nyments or transfer a	any property on a	ccount of a de	ebt that benefited an
	No☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for	this payment
Do	art 4: Identify Legal Actions, Repossession	and Faradacuras	paid	Still Owe	include cred	iitoi s name
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes. No Yes. Fill in the details.					
	Case title	Nature of the case	Court or agency		Status of th	e case
	Case number Dept. of Revenue vs. NICHOLAS KOLEAS 2018TW000291	Tax warrant	Washington Co Court 432 E. Washing West Bend, WI	ton Avenue	☐ Pending ☐ On appe ☐ Conclud	
	New Penn Financial LLC vs. Nicholas J. Koleas et al 2018CV000600	Civil	Washington Co Court 432 E. Washing West Bend, WI	ton Avenue	■ Pending □ On appe □ Conclud	al
	Landmark Credit Union vs. Victoria J Robertson 2018CV000656	Civil	Washington Co Court 432 E. Washing West Bend, WI	ton Avenue	☐ Pending ☐ On appe ☐ Conclud	al
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.		perty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?
	Creditor Name and Address	Describe the Property	1	Date		Value of the property
		Explain what happen	ed			F F V
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be No Yes, Fill in the details.		cluding a bank or fii	nancial institutior	n, set off any a	nmounts from your
	Creditor Name and Address	Describe the action the	ne creditor took		action was	Amount
				taker	1	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 otor 2	Nicholas James Koleas Victoria Janice Koleas		Case r	number (if known)	
12.	cour	in 1 year before you filed for bankru t-appointed receiver, a custodian, o No Yes		as any of your property in the possessioner official?	n of an assignee for the bend	efit of creditors, a
Par	rt 5:	List Certain Gifts and Contribution	าร			
13.	☐ Gifts per	in 2 years before you filed for bankr No Yes. Fill in the details for each gift. s with a total value of more than \$60 person	00	lid you give any gifts with a total value of Describe the gifts	more than \$600 per person Dates you gave the gifts	? Value
	Add	ress:				
14.		in 2 years before you filed for bankr No Yes. Fill in the details for each gift or c s or contributions to charities that	contributi	lid you give any gifts or contributions witon. Describe what you contributed	h a total value of more than Dates you	\$600 to any charity?
	mor Cha	e than \$600 rity's Name ress (Number, Street, City, State and ZIP Cod		Describe what you contributed	contributed	value
Par	rt 6:	List Certain Losses				
15.	or ga ■ □	ambling? No Yes. Fill in the details.		since you filed for bankruptcy, did you lo		
		cribe the property you lost and the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pe ce claims on line 33 of Schedule A/B: Prope		Value of property lost
Par	rt 7:	List Certain Payments or Transfer	s			
16.	Inclu	ulted about seeking bankruptcy or	preparir	d you or anyone else acting on your behang a bankruptcy petition? s, or credit counseling agencies for services		rty to anyone you
		Yes. Fill in the details.				
	Add	son Who Was Paid Iress ail or website address son Who Made the Payment, if Not \	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	301 5th	tton Law Group West Wisconsin Avenue Floor vaukee, WI 53203			12/12/18	\$20.00
	200	n Credit & Debt Counseling Agen 03 387th Avenue lsey, SD 57384	су		12/12/18	\$20.00

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

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17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes, Fill in the details.							
	Person Who Was Paid Address	Description and va	llue of any prope	erty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already links of No Yes. Fill in the details.	iness or financial affai e as security (such as th	rs?					
	Person Who Received Transfer Address	Description and va property transferre			nny property or received or debts change	Date transfer was made		
	Person's relationship to you Various 3rd parties	Sold equipment to through Facebook Craigslist. Equipm three photo booth full DJ sets valued total.	cand nent included s and three	\$5,000 tot	ral			
19.	Within 10 years before you filed for bankrupton beneficiary? (These are often called asset-protection No Yes. Fill in the details.		property to a se	elf-settled true	st or similar device o	of which you are a		
	Name of trust Description and value of the property transferred Date Transfer was made							
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stora	age Units				
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred?	•						
	Include checking, savings, money market, or chouses, pension funds, cooperatives, associa			f deposit; sha	ares in banks, credit	unions, brokerage		
	■ No □ Yes. Fill in the details.							
		ast 4 digits of ccount number	Type of account instrument	clos	e account was sed, sold, ved, or nsferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables? No	ar before you filed for I	bankruptcy, any	safe deposit	box or other deposit	eory for securities,		
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)					Do you still have it?		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Nicholas James Koleas Debtor 2 Victoria Janice Koleas

Case number (if known)

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	□ No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
	River Road Storage 820 North River Road West Bend, WI 53090		Debtors stored the business property in the storage unit, the 3 DJ sets and 3 Photo Booths, all have now been sold. Additionally, the Debtors stored some blankets and other small household goods, but all household goods are now in there home.	■ No □ Yes					
Par	t 9: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing for,	or hold in trust					
	■ No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Par	t 10: Give Details About Environmental Inform	,							
For	the purpose of Part 10, the following definitions	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sui	ir, land, soil, surface water, ground							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate, o	r utilize it or used					
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	ubstance,					
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.						
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	e under or in violation of an environme	ntal law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any	release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
		,							

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

_	otor 2			Ca	ase number (if known)	
20	Have			_		4
20.	пач	e you been a party in any judicial or adı	ministrative proceeding under any	environ	mentariaw? include settlemer	its and orders.
		No Yes. Fill in the details.				
		se Title se Number	Court or agency Name Address (Number, Street, City,	Na	ature of the case	Status of the case
			State and ZIP Code)			
Pa	rt 11:	Give Details About Your Business or	Connections to Any Business			
27.	With	nin 4 years before you filed for bankrup	tcy, did you own a business or ha	ive any o	f the following connections to	any business?
		☐ A sole proprietor or self-employed i	in a trade, profession, or other act	tivity, eitl	ner full-time or part-time	
		☐ A member of a limited liability comp	pany (LLC) or limited liability partr	nership (I	LLP)	
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	ecutive of a corporation			
		■ An owner of at least 5% of the votin	g or equity securities of a corpora	ation		
		No. None of the above applies. Go to	Part 12.			
		Yes. Check all that apply above and fil	I in the details below for each bus	iness.		
		siness Name	Describe the nature of the busin	ness	Employer Identification nun	
		dress nber, Street, City, State and ZIP Code)	Name of accountant or bookkee	eper	Do not include Social Secur	ity number or ITIN.
				•	Dates business existed	
	Nick Koleas Productions, Inc.		DJ Business		EIN:	
					From-To 2013-2017	
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties. No Yes. Fill in the details below.	tcy, did you give a financial stater	nent to a	nyone about your business? I	nclude all financial
	Nar Add	me dress	Date Issued			
		mber, Street, City, State and ZIP Code)				
Pa	rt 12:	Sign Below				
are with	true a	ad the answers on this <i>Statement of Fin</i> and correct. I understand that making a Inkruptcy case can result in fines up to . §§ 152, 1341, 1519, and 3571.	false statement, concealing prop	erty, or c	btaining money or property by	
_		olas James Koleas	/s/ Victoria Janice Kole			
		s James Koleas re of Debtor 1	Victoria Janice Koleas Signature of Debtor 2			
Da	te _	lanuary 31, 2019	Date January 31, 20	019		
Did ■ N	10	attach additional pages to Your Stateme	ent of Financial Affairs for Individ	uals Filin	ng for Bankruptcy (Official Fori	n 107)?
Did ■ N		pay or agree to pay someone who is no	t an attorney to help you fill out b	ankruptc	y forms?	
		Name of Person Attach the Bankru	uptcy Petition Preparer's Notice, Dec	claration, a	and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this inform	Fill in this information to identify your case:						
Debtor 1	Nicholas James Koleas	Nicholas James Koleas					
Debtor 2 (Spouse, if filing)	Victoria Janice Koleas						
United States E	Sankruptcy Court for the: _E	astern District of Wisconsin					
Case number							

Check	Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

spouses own the same rental property, put the income from that	property	0110 0011	anni ony. n you		• •		
				Column Debtor		Colum Debto non-fi	
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissio	ons (before all	\$	91.67	\$	372.00
Alimony and maintenance payments. Do not include Column B is filled in.	e payme	ents from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly pof you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spouyou listed on line 3.	t. Includ ld, your	le regular depende	contributions nts, parents,	\$	0.00	\$	0.00
Net income from operating a business, profession, or farm	Debtor	1					
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from a business, profession, or fa	rm \$ _	0.00	Copy here ->	> \$	0.00	\$	0.00
Net income from rental and other real property	Debtor	1					
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from rental or other real property	\$	0.00	Copy here ->	> \$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

					Column A Debtor 1		Column B Debtor 2 non-filing	or	
7.	Interest,	dividends, and royalties			\$	0.00	\$	0.00	
8.	Unemplo	yment compensation			\$	0.00	\$	0.00	
		nter the amount if you contend t I Security Act. Instead, list it he	hat the amount received was a bene re:	fit under					
	For yo	J	\$0.	00					
	For yo	ur spouse	\$ 0.	00					
9.	Pension		include any amount received that wa	is a	\$	0.00	\$	0.00	
10.	Do not in received	clude any benefits received und as a victim of a war crime, a cri terrorism. If necessary, list othe	ed above. Specify the source and and the social Security Act or payment me against humanity, or international er sources on a separate page and page.	nts I or					
	-				\$	0.00		0.00	
	_				\$	0.00	. \$	0.00	
		Total amounts from separate pa	ages, if any.	+	\$	0.00	\$	0.00	
11.			income. Add lines 2 through 10 for umn A to the total for Column B.	\$	91.67	+ \$ _	372.00	= \$	463.67
Part	2: De	etermine How to Measure You	ur Deductions from Income						al average othly income
12.	Сору уо	ur total average monthly inco	me from line 11.					\$	463.67
13.	Calculate	e the marital adjustment. Che	ck one:						
	☐ You	are not married. Fill in 0 below							
	You	are married and your spouse is	s filing with you. Fill in 0 below.						
	Fill i		s not filing with you. ed in line 11, Column B, that was NC e spouse's tax liability or the spouse'						
		w, specify the basis for excludi stments on a separate page.	ng this income and the amount of inc	ome dev	oted to eac	h purpos	e. If necessar	y, list additi	onal
	If th	s adjustment does not apply, e	nter 0 below.						
				\$					
				-					
				+\$					
		Total		\$	0.0	<u>00</u> c	opy here=>		0.00
14.	Your cu	rrent monthly income. Subtr	act line 13 from line 12.					\$	463.67
15.	Calcula	te your current monthly inco	me for the year. Follow these steps	:					105.55
	15a. C	opy line 14 here=>						\$	463.67
	M	ultiply line 15a by 12 (the numb	per of months in a year).					x 1	2
	15b. T	ne result is your current monthl	y income for the year for this part of t	he form.				\$	5,564.04

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

rt 4: Sign Below By signing here, under penalty of perjury I declare that the information	on this statement and in any attachments is true and correct.
/s/ Nicholas James Koleas Nicholas James Koleas Signature of Debtor 1	X /s/ Victoria Janice Koleas Victoria Janice Koleas Signature of Debtor 2
Date January 31, 2019 MM / DD / YYYY	Date January 31, 2019 MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Nicholas James Koleas	
Victoria Janice Koleas	Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 07/01/2018 to 12/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Self-Contractor

Income by Month:

Debtor 1 Debtor 2

6 Months Ago:	07/2018	\$0.00
5 Months Ago:	08/2018	\$550.00
4 Months Ago:	09/2018	\$0.00
3 Months Ago:	10/2018	\$0.00
2 Months Ago:	11/2018	\$0.00
Last Month:	12/2018	\$0.00
	Average per month:	\$91.67

Debtor 1	Nicholas James Koleas	
	Victoria Janice Koleas	Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 07/01/2018 to 12/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: From Scratch Catering

Year-to-Date Income:

Starting Year-to-Date Income: \$1,042.00 from check dated 6/30/2018. Ending Year-to-Date Income: \$3,274.00 from check dated 12/31/2018.

Income for six-month period (Ending-Starting): \$2,232.00.

Average Monthly Income: \$372.00.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Eastern District of Wisconsin

	Lus	term District of Wisconsi	••	
In re	Nicholas James Koleas Victoria Janice Koleas		Case No.	
111 10	Victoria Janice Roleas	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPE	NSATION OF ATTO	DNEV FOD DI	ERTOD(S)
				,
co	pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 impensation paid to me within one year before the filiterendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,500.00
	Prior to the filing of this statement I have received			20.00
	Balance Due		\$	4,480.00
2. Tl	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. Tl	ne source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4 . ■	I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	bers and associates of my law firm.
	I have agreed to share the above-disclosed compen- copy of the agreement, together with a list of the na			
5. Ir	n return for the above-disclosed fee, I have agreed to r	ender legal service for all aspec	ts of the bankruptcy of	case, including:
b. c.	Analysis of the debtor's financial situation, and rend Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credit [Other provisions as needed] Formation and drafting of the Chapter 13 prosecution of motions or objections; mod matters; obtaining credit; disposition of pro- received above is insufficient to cover the compensation pursuant to Bankruptcy Rule	tement of affairs and plan which tors and confirmation hearing, a plan. If necessary, counsel n ification of the plan; correspon operty; lien avoidance actions amount of work performed, c	n may be required; nd any adjourned hea nay also provide as ndence and advice s; and defence of th	rings thereof; sistance with: defense or regarding bankruptcy-related ird-party litigation. If the amount
6. B	y agreement with the debtor(s), the above-disclosed for Representation of the debtors in any disch	nargeability actions, satisfaction		s or any other adversary.
		CERTIFICATION		
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement for	r payment to me for r	epresentation of the debtor(s) in
Jar	nuary 31, 2019	/s/ Michael J. Wat	ton	
Da		Michael J. Watton Signature of Attorna Watton Law Grou 301 West Wiscons 5th Floor Milwaukee, WI 53	ey p sin Avenue 203 Fax: (414) 273-6894	1

United States Bankruptcy Court Eastern District of Wisconsin

	Nicholas James Koleas			
In re	Victoria Janice Koleas		Case No.	
		Debtor(s)	Chapter	_13
The ab		ICATION OF CREDITOR		of their knowledge.
Date:	January 31, 2019	/s/ Nicholas James Koleas Nicholas James Koleas Signature of Debtor		

Signature of Debtor

AES/Suntrust Bank PO Box 61047 Harrisburg, PA 17106

Albiero Plumbing 1940 North Main Street West Bend, WI 53090

American Education Services Payment Center P.O. Box 2461 Harrisburg, PA 17130

American Express P.O. Box 297812 Fort Lauderdale, FL 33329-7812

Americollect PO Box 1566 Manitowoc, WI 54221-1566

Ashley Olivedo 7928 Gina Drive Racine, WI 53406

Associated Bank 200 North Adams Street Green Bay, WI 54301

AT&T PO Box5093 Carol Stream, IL 60197-6416

Aurora Health Care PO Box 091700 Milwaukee, WI 53209-8700

Capital One Bank 152 East Shore Drive 12017 0380 Glen Allen, VA 23059

Capital One Bank 10700 Capital One Way Glen Allen, VA 23060

Central Collection Corporation 3055 North Brookfield Road, Suite 31 Brookfield, WI 53045-3336

Chase Card P.O. Box 15298 Wilmington, DE 19850-5298 City of Milwaukee Violations Bureau PO Box 346 Milwaukee, WI 53201-0346

Columbia Saint Mary's PO Box 78101 Milwaukee, WI 53278-0101

Commercial Collections 500 Virginia Drive Suite 514 Fort Washington, PA 19034

Direct Loans (Department of Education) P.O. Box 5609 Greenville, TX 75403-5609

Discover Financial Services PO Box 6103 Carol Stream, IL 60197

Ditech Financial, LLC PO Box 6154 Rapid City, SD 57709-6154

Downtown Family Dental Dr. Timothy J. Merry 309 North 7th Avenue West Bend, WI 53095

Financial Control Services N114 W19225 Clinton Drive Germantown, WI 53022

FMA Alliance, LTD. 12339 Cutten Road Houston, TX 77066

Froedtert & Medical College of Wisconsin 10000 Innovatio n Drive Milwaukee, WI 53226

Froedtert & Medical College of Wisconsin 10000 Innovation Drive Milwaukee, WI 53226

Froedtert Health 400 Woodland Prime Suite 103 N74 W12501 Leatherwood Court Menomonee Falls, WI 53051

Froedtert Health Medical Group PO Box 9030 Menomonee Falls, WI 53052

Gray & Associates, LLP 16345 West Glendale Drive New Berlin, WI 53151

Great Lakes Educational Loan Services P.O. Box 7860 Madison, WI 53707

Honda Financial Services PO Box 166469 Irving, TX 75016

Illinois Tollway 2700 Ogden Ave Downers Grove, IL 60515

Independent Physicians of Wisconsin PO Box 776183 Chicago, IL 60677-6183

Infinity Healthcare Physicians SC PO Box 078894 Milwaukee, WI 53278-8894

Internal Revenue Service Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346

Journal Broadcast Group Inc. 333 West State Street Milwaukee, WI 53203

Kohn Law Firm S.C. 735 North Water Street Suite 1300 Milwaukee, WI 53202

Kohner, Mann & Kailas SC Washington Bldg 2nd Fl 4650 N Port Washington Milwaukee, WI 53212

Landmark Credit Union P.O. Box 510870 New Berlin, WI 53151

Legal Services Program of Wisconsin 820 North Plankinton Avenue PO Box 510498
Milwaukee, WI 53203

Lighthouse Clinic, LLC 6400 Industrial Loop Greendale, WI 53129

New Penn Financial LLC 55 Beattie Place, Suite 110 Greenville, SC 29601

Newtek 6737 West Washington street Suite 2275 Milwaukee, WI 53214

Optimum Outcomes Inc. PO Box 58015 Raleigh, NC 27658

Peter B King Attorney at Law SC PO Box 374 Fontana, WI 53125

Professional Account Management P.O. Box 2080 Milwaukee, WI 53201

Regus 11414 West Parkplace Suite 202 Milwaukee, WI 53224

River Road Storage 820 North River Road West Bend, WI 53090

Rogers Memorial Hospital 34700 Valley Road Oconomowoc, WI 53066

Shellpoint Mortgage Servicing 55 Beattie Place, Suite 500 Greenville, SC 29601

Smart Reach Digital 11800 West Grange Avenue Hales Corners, WI 53130

Spectrum 1600 Dublin Road Columbus, OH 43215

St. Joseph's Hospital Patient Accounts 5000 W. Chambers Street Milwaukee, WI 53210-1688

Stripe 510 Townsend Street San Francisco, CA 94103 SunTrust Bank PO Box 291286 Nashville, TN 37229

Synchrony Bank c/o PRA Receivables Management, LLC P.O. Box 41021 Norfolk, VA 23541

TJX Rewards/SYNCB PO Box 530949 Atlanta, GA 30353

Universal Processing Services of WI LLC 754 North 4th Street Milwaukee, WI 53203

US Bank P.O. Box 1800 Saint Paul, MN 55101-0800

US Department of Education P.O. Box 5609 Greenville, TX 75403-5609

Vehicle Finance Services 4141 South 108th Street Greenfield, WI 53228

We Energies Attn: Bankruptcy Dept. - A130 P.O. Box 2046 Milwaukee, WI 53201-2046

West Bend Clinic 1700 W. Paradise Drive West Bend, WI 53095

Wisconsin Department of Justice 17 West Main Street Madison, WI 53707-7857

Wisconsin Department of Revenue Special Procedures Unit P.O. Box 8901 Madison, WI 53708-8901

United States Bankruptcy Court Eastern District of Wisconsin

	Nicholas James Koleas			
In re	Victoria Janice Koleas		Case No.	
		Debtor(s)	Chapter	13

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: 0	ONLY INCLUDE information d	irectly related to the busin	ness operation.)
ART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTE	IS:		
1. Gross Income For 12 Months Prior to Filing:	\$	0.00	
ART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY IN	COME:		
2. Gross Monthly Income		\$	4,250.00
ART C - ESTIMATED FUTURE MONTHLY EXPENSES:			
3. Net Employee Payroll (Other Than Debtor)	\$	0.00	
4. Payroll Taxes		0.00	
5. Unemployment Taxes		0.00	
6. Worker's Compensation		0.00	
7. Other Taxes		0.00	
8. Inventory Purchases (Including raw materials)		0.00	
9. Purchase of Feed/Fertilizer/Seed/Spray		0.00	
10. Rent (Other than debtor's principal residence)		150.00	
11. Utilities		50.00	
12. Office Expenses and Supplies		50.00	
13. Repairs and Maintenance		0.00	
14. Vehicle Expenses		0.00	
15. Travel and Entertainment		0.00	
16. Equipment Rental and Leases		0.00	
17. Legal/Accounting/Other Professional Fees		0.00	
18. Insurance		0.00	
19. Employee Benefits (e.g., pension, medical, etc.)		0.00	
20. Payments to Be Made Directly By Debtor to Secured Creditors For Pre-Petition	on Business Debts (Specify):		
DESCRIPTION	TOTAL		
21. Other (Specify):			
DESCRIPTION	TOTAL		
22. Total Monthly Expenses (Add items 3-21)		\$	250.00
ART D - ESTIMATED AVERAGE NET MONTHLY INCOME:			
23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2)		\$	4,000.00